

FOR OFFICE USE ONLY				
CASE NO.:				
DATE SUBMITTED:				

ADMINISTRATIVE ADJUSTMENT APPLICATION

	М	INIMUM SUBMITTAL REQUIR	EMENTS:
Filing Fee of Application	completed in full.	cognized of the applicant such as	s site plans, elevation drawings, sign details
			t of any extra materials required.
Date of Preappl	ication Confere	ence:	
		c'S INFORMATION (Primary Co	
			City
State	Zip Code	E-Mail Address	
Phone Number		Fax Numbe	r
PROPERTY OWN	ER'S INFORMAT	ΓΙΟΝ:	
Name			
			City
State	Zip Code	E-Mail Address _	
Phone Number		Fax Numbe	r
LOCATION OF PR	ROPERTY:		
Address			
Description if the	ere is no Lot, Bloc	k and Subdivision	
Current Zoning of	Subject Property:		
Applicable Ordinar	nce Section:		

6/13/03

ADMINISTRATIVE ADJUSTMENT REQUEST

The following specific adjustment (up to 10%) from	m the ordinance requirements is requested:
This adjustment will not be contrary to the public i	interest by virtue of the following facts:
The greating of the adjustment will not metavially	
	or adversely affect adjacent land uses or the physical cause of the following:
The granting of the adjustment will be consistent Ordinance because of the following:	with the purpose and intent of the Unified Development
The applicant has prepared this application and of hereto are true, correct and complete.	certifies that the facts stated herein and exhibits attached
Signature and Title	

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